

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	<i>AB</i>		<i>12/21/99</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		<i>16</i>	<i>010300</i>
FORMALITY REVIEW	<i>ERLW</i>	<i>70820</i>	<i>1-13-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
+	Restricted	O	Objected

Claim	Final	Original	Date
1	✓	✓	<i>4-29-02</i>
2	✓	✓	<i>11-1-02</i>
3	✓	✓	<i>6-30-03</i>
4	✓	✓	<i>4-28-04</i>
5	✓	✓	
6	✓	✓	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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Best Available Copy

If more than 150 claims or 10 actions
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